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## BIB DATA SHEET

CONFIRMATION NO. 9424

<b>SERIAL NUMBER</b> 10/596,682	<b>FILING or 371(c) DATE</b> 06/21/2006 <b>RULE</b>	<b>CLASS</b> 137	<b>GROUP ART UNIT</b> 3753	<b>ATTORNEY DOCKET NO.</b> P31,725 USA	
<b>APPLICANTS</b> Erhard Moses, Einbeck,; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP04/11194 10/07/2004 <b>** FOREIGN APPLICATIONS *****</b> GERMANY 20319920.0 12/23/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/29/2008					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /CRAIG JAMES Acknowledged PRICE/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 10	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> FOX ROTHSCHILD LLP 997 Lenox Drive, Bldg. #3 Lawrenceville, NJ 08648 UNITED STATES					
<b>TITLE</b> BLEED VALVE					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		